

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081736		2 Total pages filed: 89	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.		FIRST Michelle J.	MI	
	NICKNAME		LAST Beckley	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; 1845 E Frankford Road  Carrollton, TX 75007		ZIP CODE	
		OFFICE USE ONLY			
		Date Received ELECTRONICALLY FILED 01/14/2019			
		Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR Mr.		FIRST Martin	MI
		NICKNAME		LAST Mikes	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3206 Sugarbush Dr.  Carrollton, TX 75007			
7 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (407) 288-2484			
8 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED		Month Day Year    THROUGH    Month Day Year 10/28/2018    12/31/2018			
10 ELECTION		ELECTION DATE Month Day Year 11/10/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE		OFFICE HELD (if any) State Representative District 65 Denton		12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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13 C / OH NAME	Beckley, Michelle J. (Ms.)	14 Filer ID	(Ethics Commission Filers)
		00081736	

15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	<b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	91,758.93
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	<b>TOTAL POLITICAL EXPENDITURES</b>	\$	24,090.69
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	63,282.86
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	11,000.00

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Michelle J. Beckley

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Beckley, Michelle J. (Ms.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00081736	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	84,279.08
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	7,479.85
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	24,090.69
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/63 Rpt: 4/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/15/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Better Texas PAC <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77021-2827	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC Contributor address; City; State; Zip Code  Austin, TX 78768-4609	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AFSCME People / AFL-CIO Contributor address; City; State; Zip Code  Washington, DC 20036-5665	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T Texas PAC Contributor address; City; State; Zip Code  Austin, TX 78701-2442	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Absalom, Karen Contributor address; City; State; Zip Code  Carrollton, TX 75006-1530	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/63 Rpt: 5/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackers, Sandra <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94122-3609	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Berta Contributor address; City; State; Zip Code  Carrollton, TX 75007-5121	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Ernest Contributor address; City; State; Zip Code  Hillsboro, OR 97124-7076	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Ernest Contributor address; City; State; Zip Code  Hillsboro, OR 97124-7076	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Phil Contributor address; City; State; Zip Code  Carrollton, TX 75007-5027	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/63 Rpt: 6/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angus, Kate <b>6</b> Contributor address; City; State; Zip Code  New York, NY 10003-7244	<b>7</b> Amount of Contribution (\$)  \$6.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appleford, Alan Contributor address; City; State; Zip Code  Oakland, CA 94611-1714	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Appleford, Alan Contributor address; City; State; Zip Code  Oakland, CA 94611-1714	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asel, Jessica Contributor address; City; State; Zip Code  Carrollton, TX 75010-3205	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Association of Texas Professional Educators PAC (ATPE-PAC) Contributor address; City; State; Zip Code  Austin, TX 78752-3747	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/63 Rpt: 7/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Steve <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-4013	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ausley, Robbie Contributor address; City; State; Zip Code  Austin, TX 78731-4049	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Albert Contributor address; City; State; Zip Code  Amarillo, TX 79107-1717	Amount of Contribution (\$)  \$65.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babula, Bracken Contributor address; City; State; Zip Code  Conshohocken, PA 19428-2223	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Christopher Contributor address; City; State; Zip Code  Washington, DC 20008-5635	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/63 Rpt: 8/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banner, Andra <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007-6238	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Mark Contributor address; City; State; Zip Code  New York, NY 10024-6140	Amount of Contribution (\$)  \$6.25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhouse, Sharon Contributor address; City; State; Zip Code  Corinth, TX 76208-4803	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Mary Contributor address; City; State; Zip Code  Bellville, TX 77418-8622	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Christopher Contributor address; City; State; Zip Code  Brooklyn, NY 11238-3883	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/63 Rpt: 9/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/15/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bath, Aaron And Natasha <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75006-2908	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Daniel Contributor address; City; State; Zip Code  Groveland, MA 01834-1800	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, K Contributor address; City; State; Zip Code  Carrollton, TX 75007-5946	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer Alliance of TX Contributor address; City; State; Zip Code  Austin, TX 78701-2656	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellwood, Lucy Contributor address; City; State; Zip Code  Portland, OR 97214-4238	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/63 Rpt: 10/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Theresa <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075-5849	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Amy Contributor address; City; State; Zip Code  Chapel Hill, NC 27514-4856	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berzoff, Joan Contributor address; City; State; Zip Code  Northampton, MA 01060-2910	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bliven, Dave Contributor address; City; State; Zip Code  East Corinth, VT 05040-9791	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bliven, Dave Contributor address; City; State; Zip Code  East Corinth, VT 05040-9791	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/63 Rpt: 11/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/08/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blount, Susan <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-3330	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braine, William Contributor address; City; State; Zip Code  Cornwall On Hudson, NY 12520-1507	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon, Thea Contributor address; City; State; Zip Code  Salt Lake City, UT 84108-2917	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Phil Contributor address; City; State; Zip Code  Folsom, CA 95630-1962	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Phil Contributor address; City; State; Zip Code  Folsom, CA 95630-1962	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/63 Rpt: 12/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/29/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Rachel <b>6</b> Contributor address; City; State; Zip Code New York, NY 10024-1733	<b>7</b> Amount of Contribution (\$) \$6.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLEAT PAC Contributor address; City; State; Zip Code Austin, TX 78701-1644	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAFTPAC Contributor address; City; State; Zip Code Austin, TX 78766-7356	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CWA Political Action Contributor address; City; State; Zip Code Washington, DC 20001-2760	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caruso, Judi Contributor address; City; State; Zip Code Albuquerque, NM 87120-5337	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/63 Rpt: 13/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casall, MacKenzie <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007-1424	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casseday, John Contributor address; City; State; Zip Code  Seattle, WA 98103-4903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casseday, John Contributor address; City; State; Zip Code  Seattle, WA 98103-4903	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Randall Contributor address; City; State; Zip Code  Austin, TX 78704-4611	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chappelow, James Contributor address; City; State; Zip Code  Austin, TX 78728-4309	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/63 Rpt: 14/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenven, Norman <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731-5213	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childers, Daniel Contributor address; City; State; Zip Code  Chicago, IL 60637-1718	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Turner Campaign Contributor address; City; State; Zip Code  Arlington, TX 76003-1138	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, William Contributor address; City; State; Zip Code  Austin, TX 78704-2834	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Citizen, Carolyn Contributor address; City; State; Zip Code  Grapevine, TX 76051-7810	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/63 Rpt: 15/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/04/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Civins, Jeff <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2962	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sarah Contributor address; City; State; Zip Code  Dallas, TX 75205-2629	Amount of Contribution (\$)  \$1.19
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Tobin Contributor address; City; State; Zip Code  Fort Worth, TX 76107-1619	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Jill Contributor address; City; State; Zip Code  Dallas, TX 75214-1904	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohn-Haft, Hera Contributor address; City; State; Zip Code  West Hartford, CT 06119-1710	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/63 Rpt: 16/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/09/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Garnet <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77288-0140	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Diana <hr/> Contributor address; City; State; Zip Code  Skiatook, OK 74070-0226	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Diana <hr/> Contributor address; City; State; Zip Code  Skiatook, OK 74070-0226	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connelly, Serena <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-2601	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) Contran
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connelly, Serena <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240-2601	Amount of Contribution (\$)  \$40,000.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) Contran



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/63 Rpt: 17/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Connie <b>6</b> Contributor address; City; State; Zip Code  Cedar Hill, TX 75104-1755	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Connie Contributor address; City; State; Zip Code  Cedar Hill, TX 75104-1755	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corrick, Stephen Contributor address; City; State; Zip Code  Houston, TX 77098-0308	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corrick, Stephen Contributor address; City; State; Zip Code  Houston, TX 77098-0308	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cripe, Lynne Contributor address; City; State; Zip Code  Alexandria, VA 22309-2504	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/63 Rpt: 18/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/03/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dace, Letitia <b>6</b> Contributor address; City; State; Zip Code Manhattan, KS 66502-3538	<b>7</b> Amount of Contribution (\$) \$3.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dace, Letitia Contributor address; City; State; Zip Code Manhattan, KS 66502-3538	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darr, Marcus Contributor address; City; State; Zip Code Carrollton, TX 75007-2985	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daveiga, Michael Contributor address; City; State; Zip Code Concord, CA 94518-1309	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daveiga, Michael Contributor address; City; State; Zip Code Concord, CA 94518-1309	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/63 Rpt: 19/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/03/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jack <b>6</b> Contributor address; City; State; Zip Code Blanchard, OK 73010-3597	<b>7</b> Amount of Contribution (\$) \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jean Contributor address; City; State; Zip Code San Diego, CA 92116-3980	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jean Contributor address; City; State; Zip Code San Diego, CA 92116-3980	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy Contributor address; City; State; Zip Code Austin, TX 78704-4141	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas Contributor address; City; State; Zip Code Bakersfield, CA 93309-2702	Amount of Contribution (\$) \$1.11
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/63 Rpt: 20/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Douglas <b>6</b> Contributor address; City; State; Zip Code Bakersfield, CA 93309-2702	<b>7</b> Amount of Contribution (\$) \$1.11
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolan, Connaught Contributor address; City; State; Zip Code Ukiah, CA 95482-8899	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolan, Connaught Contributor address; City; State; Zip Code Ukiah, CA 95482-8899	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dryburgh, James Contributor address; City; State; Zip Code Carrollton, TX 75007-3960	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Kurt Contributor address; City; State; Zip Code Carrollton, TX 75007-5748	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/63 Rpt: 21/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/17/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Kurt <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007-5748	<b>7</b> Amount of Contribution (\$)  \$65.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrlich, Kurt Contributor address; City; State; Zip Code  Carrollton, TX 75007-5748	Amount of Contribution (\$)  \$65.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elder, Ronald Contributor address; City; State; Zip Code  Lewisville, TX 75057-3745	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Christopher Contributor address; City; State; Zip Code  Austin, TX 78704-4526	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jillian Contributor address; City; State; Zip Code  Goleta, CA 93117	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/63 Rpt: 22/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emanuel, Victor <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-6931	<b>7</b> Amount of Contribution (\$)  \$65.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Energy Leaders PAC of Vistra Energy Contributor address; City; State; Zip Code  Irving, TX 75039-2479	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Douglas Contributor address; City; State; Zip Code  Carrollton, TX 75010-6416	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Marjorie Contributor address; City; State; Zip Code  Studio City, CA 91604-3646	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engel, Marjorie Contributor address; City; State; Zip Code  Studio City, CA 91604-3646	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/63 Rpt: 23/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/15/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Johnson Campaign <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-8517	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Edward Contributor address; City; State; Zip Code  Austin, TX 78746-7767	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fink, Daniel Contributor address; City; State; Zip Code  San Jose, CA 95112-1926	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florida, Sarita Contributor address; City; State; Zip Code  Lewisville, TX 75057-2259	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foulke, Tim Contributor address; City; State; Zip Code  Portland, OR 97212-5241	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/63 Rpt: 24/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/03/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foulke, Tim <b>6</b> Contributor address; City; State; Zip Code  Portland, OR 97212-5241	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Diana Contributor address; City; State; Zip Code  New Rochelle, NY 10804-4509	Amount of Contribution (\$)  \$3.25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franchi, Bianca Contributor address; City; State; Zip Code  Denville, NJ 07834-1865	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franchi, Bianca Contributor address; City; State; Zip Code  Denville, NJ 07834-1865	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frenkil, Samuel Contributor address; City; State; Zip Code  Carrollton, TX 75007-5326	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/63 Rpt: 25/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of TWU PAC <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78767-1026	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Toby Contributor address; City; State; Zip Code  Fort Worth, TX 76109-9505	Amount of Contribution (\$)  \$1.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Md, Catalina E Contributor address; City; State; Zip Code  Dallas, TX 75382	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Cheryl Contributor address; City; State; Zip Code  Bedford, TX 76021-7239	Amount of Contribution (\$)  \$3.58
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garriel, Barbara Contributor address; City; State; Zip Code  Bayville, NY 11709-2706	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/63 Rpt: 26/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garriel, Barbara <b>6</b> Contributor address; City; State; Zip Code  Bayville, NY 11709-2706	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gensor, Eda Contributor address; City; State; Zip Code  Dallas, TX 75287-4913	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goettling, Sandra Contributor address; City; State; Zip Code  Logandale, NV 89021	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Ceclia Contributor address; City; State; Zip Code  Arlington, TX 76011-5640	Amount of Contribution (\$)  \$1.09
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Susanna Contributor address; City; State; Zip Code  Oakland, CA 94610-1850	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/63 Rpt: 27/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Susanna <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94610-1850	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graydon Group Contributor address; City; State; Zip Code  Austin, TX 78701-5007	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griswold, David Contributor address; City; State; Zip Code  Miami, FL 33179-5732	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griswold, David Contributor address; City; State; Zip Code  Miami, FL 33179-5732	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Steve Contributor address; City; State; Zip Code  La Mesa, CA 91941-7061	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/63 Rpt: 28/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Steve <b>6</b> Contributor address; City; State; Zip Code  La Mesa, CA 91941-7061	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubbs, Rachel Contributor address; City; State; Zip Code  Lewis Center, OH 43035-6148	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grynberg, Michael Contributor address; City; State; Zip Code  Evanston, IL 60202-2624	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guill, Linda Contributor address; City; State; Zip Code  Carrollton, TX 75010-4668	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullett, Kathleen Contributor address; City; State; Zip Code  Lawrenceburg, KY 40342-9642	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/63 Rpt: 29/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halko, Gabrielle <b>6</b> Contributor address; City; State; Zip Code Philadelphia, PA 19119-1108	<b>7</b> Amount of Contribution (\$) \$3.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Ruel Contributor address; City; State; Zip Code Dallas, TX 75201-3810	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) AmeriSouth Realty
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanrahan, Nigel Contributor address; City; State; Zip Code Carrollton, TX 75007-3121	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatkin, Naomi Contributor address; City; State; Zip Code Oakland, CA 94618-1732	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatkin, Naomi Contributor address; City; State; Zip Code Oakland, CA 94618-1732	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/63 Rpt: 30/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/17/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatten, Ronda <b>6</b> Contributor address; City; State; Zip Code Carrollton, TX 75010-6403	<b>7</b> Amount of Contribution (\$) \$6.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Carly Contributor address; City; State; Zip Code Washington, DC 20009-5948	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heller, Paul Contributor address; City; State; Zip Code Farmers Branch, TX 75244-4753	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Nancy Contributor address; City; State; Zip Code Lincoln, MA 01773-5109	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hestor, Sue Contributor address; City; State; Zip Code San Francisco, CA 94110-5812	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/63 Rpt: 31/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hestor, Sue <b>6</b> Contributor address; City; State; Zip Code San Francisco, CA 94110-5812	<b>7</b> Amount of Contribution (\$) \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Fred Contributor address; City; State; Zip Code St Charles, IL 60174-6517	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Fred Contributor address; City; State; Zip Code St Charles, IL 60174-6517	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Dr. John D Contributor address; City; State; Zip Code College Station, TX 77845-8599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooker, Lauren Contributor address; City; State; Zip Code New York, NY 10033-5223	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/63 Rpt: 32/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/09/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Terzah <b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77584-9409	<b>7</b> Amount of Contribution (\$)  \$3.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotel PAC of Texas Hotels and Lodging Association Contributor address; City; State; Zip Code  Austin, TX 78701-1036	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyink, John Contributor address; City; State; Zip Code  San Marcos, TX 78666-4700	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Independent Insurance Agents of Texas Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irons, Sheila Contributor address; City; State; Zip Code  Carrollton, TX 75006-1605	Amount of Contribution (\$)  \$6.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/63 Rpt: 33/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Larry <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075-5500	<b>7</b> Amount of Contribution (\$)  \$1.14
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenett, Dianne E Contributor address; City; State; Zip Code  Palo Alto, CA 94301-1501	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Janna Contributor address; City; State; Zip Code  Seattle, WA 98119-3300	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnsson, Inge Contributor address; City; State; Zip Code  Frisco, TX 75034-4042	Amount of Contribution (\$)  \$1.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joihnson, Dorothea Contributor address; City; State; Zip Code  Dallas, TX 75234-6522	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/63 Rpt: 34/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jocelyn <b>6</b> Contributor address; City; State; Zip Code  Tumwater, WA 98512-6910	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jocelyn Contributor address; City; State; Zip Code  Tumwater, WA 98512-6910	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Michael Contributor address; City; State; Zip Code  Dallas, TX 75219-4340	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Jim Contributor address; City; State; Zip Code  El Paso, TX 79952-2433	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerbel, Susan Contributor address; City; State; Zip Code  Takoma Park, MD 20912-5423	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/63 Rpt: 35/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/01/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khalsa, Gurudarshan <b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95126-2812	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Neal Contributor address; City; State; Zip Code  San Francisco, CA 94110-2619	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Neal Contributor address; City; State; Zip Code  San Francisco, CA 94110-2619	Amount of Contribution (\$)  \$1.43
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kittle, Kathleen Contributor address; City; State; Zip Code  Carrollton, TX 75010-4052	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kittle, Kathleen Contributor address; City; State; Zip Code  Carrollton, TX 75010-4052	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/63 Rpt: 36/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowles, Zachary <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20017-1036	<b>7</b> Amount of Contribution (\$)  \$1.57
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koelher, George Contributor address; City; State; Zip Code  New York, NY 10032-1004	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koelher, George Contributor address; City; State; Zip Code  New York, NY 10032-1004	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolbisen, John Contributor address; City; State; Zip Code  Half Moon Bay, CA 94019-1778	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krishnan, Preethi Contributor address; City; State; Zip Code  San Francisco, CA 94114-2433	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/63 Rpt: 37/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lagerblad, Robert <b>6</b> Contributor address; City; State; Zip Code  Corinth, TX 76210-0039	<b>7</b> Amount of Contribution (\$)  \$1.13
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Alice Contributor address; City; State; Zip Code  Vienna, VA 22181-6041	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Joseph Contributor address; City; State; Zip Code  Dallas, TX 75287-5984	Amount of Contribution (\$)  \$65.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leaders, Ron Contributor address; City; State; Zip Code  Vashon, WA 98070-6607	Amount of Contribution (\$)  \$2.27
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lean, Judith Contributor address; City; State; Zip Code  Alexandria, VA 22307-1954	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/63 Rpt: 38/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/03/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lean, Judith <b>6</b> Contributor address; City; State; Zip Code  Alexandria, VA 22307-1954	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavell, Linda Contributor address; City; State; Zip Code  Spokane, WA 99208-5007	Amount of Contribution (\$)  \$1.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leavell, Linda Contributor address; City; State; Zip Code  Spokane, WA 99208-5007	Amount of Contribution (\$)  \$1.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leeper, Sarah Contributor address; City; State; Zip Code  Washington, DC 20018-3820	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Alan Contributor address; City; State; Zip Code  Dallas, TX 75204-2105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/63 Rpt: 39/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/29/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levinsohn, Anna <b>6</b> Contributor address; City; State; Zip Code  Chapel Hill, NC 27516-1501	<b>7</b> Amount of Contribution (\$)  \$6.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP Contributor address; City; State; Zip Code  Dallas, TX 75201-2748	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lubinus, Manuel Contributor address; City; State; Zip Code  Frisco, TX 75034-4673	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Denis Contributor address; City; State; Zip Code  Carrollton, TX 75007-2971	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makman, Marianne Contributor address; City; State; Zip Code  New Rochelle, NY 10804-1013	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/63 Rpt: 40/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/02/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlowe, Thomas <b>6</b> Contributor address; City; State; Zip Code  Rahway, NJ 07065-2600	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlowe, Thomas Contributor address; City; State; Zip Code  Rahway, NJ 07065-2600	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Jim Contributor address; City; State; Zip Code  Austin, TX 78703-1645	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Natasha Contributor address; City; State; Zip Code  Cedar Park, TX 78613-6838	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massie, Michelle Contributor address; City; State; Zip Code  Santa Cruz, CA 95060-2504	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/63 Rpt: 41/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massie, Michelle <b>6</b> Contributor address; City; State; Zip Code  Santa Cruz, CA 95060-2504	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElmurry, Thomas Contributor address; City; State; Zip Code  Dyer, IN 46311-1964	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Michael Contributor address; City; State; Zip Code  Carrollton, TX 75007-5716	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillan, William Contributor address; City; State; Zip Code  Arlington, MA 02474-8518	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillan, William Contributor address; City; State; Zip Code  Arlington, MA 02474-8518	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/63 Rpt: 42/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVey, Diane <b>6</b> Contributor address; City; State; Zip Code  Guysville, OH 45735-9417	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minden, Shelley Contributor address; City; State; Zip Code  Seattle, WA 98102-4445	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minden, Shelley Contributor address; City; State; Zip Code  Seattle, WA 98102-4445	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moellering, Charlotte Contributor address; City; State; Zip Code  Carrollton, TX 75007-2982	Amount of Contribution (\$)  \$9.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moellering, Charlotte Contributor address; City; State; Zip Code  Carrollton, TX 75007-2982	Amount of Contribution (\$)  \$9.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/63 Rpt: 43/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monette, Angela <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75219-7715	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Timothy Contributor address; City; State; Zip Code  Lewisville, TX 75067-7483	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moroni, Michael Contributor address; City; State; Zip Code  Oran, MO 63771-8214	Amount of Contribution (\$)  \$1.25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Movic, Mark Contributor address; City; State; Zip Code  Des Moines, IA 50311-2544	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mustain, Sharon Contributor address; City; State; Zip Code  Lewisville, TX 75067-6723	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/63 Rpt: 44/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Cindy <b>6</b> Contributor address; City; State; Zip Code  Lewisville, TX 75077-2737	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nitsch, Marianne Contributor address; City; State; Zip Code  Austin, TX 78756-2819	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Jonell Contributor address; City; State; Zip Code  Willis, TX 77318-6428	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Malinda Contributor address; City; State; Zip Code  Carrollton, TX 75007-2935	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohland, Karen Contributor address; City; State; Zip Code  Lawrenceville, NJ 08648-1228	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/63 Rpt: 45/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohland, Karen <b>6</b> Contributor address; City; State; Zip Code Lawrenceville, NJ 08648-1228	<b>7</b> Amount of Contribution (\$) \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oncor Texas State Political Action Committee of Oncor Electric Delivery Contributor address; City; State; Zip Code Dallas, TX 75202-1234	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jim Contributor address; City; State; Zip Code Denton, TX 76205-8222	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jim Contributor address; City; State; Zip Code Denton, TX 76205-8222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jim Contributor address; City; State; Zip Code Denton, TX 76205-8222	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/63 Rpt: 46/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/08/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jim <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76205-8222	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palomares, Virginia Contributor address; City; State; Zip Code  Austin, TX 78750-2865	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parziale, Elizabeth Contributor address; City; State; Zip Code  Maple Glen, PA 19002-2829	Amount of Contribution (\$)  \$2.27
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, David Contributor address; City; State; Zip Code  Carlsbad, CA 92011-5137	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plummer, Mitty Contributor address; City; State; Zip Code  Denton, TX 76205	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/63 Rpt: 47/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poire, Roger <b>6</b> Contributor address; City; State; Zip Code  Gilford, NH 03249-7630	<b>7</b> Amount of Contribution (\$)  \$2.27
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, Steven Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2018	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) United Educators Association
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Betty Contributor address; City; State; Zip Code  Fort Worth, TX 76133-2811	Amount of Contribution (\$)  \$1.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pr, Katie Contributor address; City; State; Zip Code  Washington, DC 20011-5836	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qin, Connie Contributor address; City; State; Zip Code  Los Angeles, CA 90064-3801	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/63 Rpt: 48/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quackenbush, Melissa <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77069-3401	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwaters, Robert Contributor address; City; State; Zip Code  Fort Wayne, IN 46809-1230	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainwaters, Robert Contributor address; City; State; Zip Code  Fort Wayne, IN 46809-1230	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Shannon Contributor address; City; State; Zip Code  Austin, TX 78701-3956	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Raul Contributor address; City; State; Zip Code  Lewisville, TX 75057-5016	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/63 Rpt: 49/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Barry <b>6</b> Contributor address; City; State; Zip Code Stormville, NY 12582-5302	<b>7</b> Amount of Contribution (\$) \$30.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudner, Steven Contributor address; City; State; Zip Code Dallas, TX 75225-2839	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rudner Law Offices
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Clifford Contributor address; City; State; Zip Code Lewisville, TX 75077-2547	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutledge, Clifford Contributor address; City; State; Zip Code Lewisville, TX 75077-2547	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salerno, Lillian Contributor address; City; State; Zip Code Lewisville, TX 75057-3731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/63 Rpt: 50/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/14/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scardino, Albert <b>6</b> Contributor address; City; State; Zip Code Bluffton, SC 29910-2102	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenkkan, Pete Contributor address; City; State; Zip Code Austin, TX 78701-3790	Amount of Contribution (\$) \$142.61
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlotterbeck, Diana Contributor address; City; State; Zip Code Aledo, TX 76008-6472	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlotterbeck, Diana Contributor address; City; State; Zip Code Aledo, TX 76008-6472	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnoebelen, Eric Contributor address; City; State; Zip Code Plano, TX 75086-8013	Amount of Contribution (\$) \$1.14
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/63 Rpt: 51/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Gary <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75229-3017	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selby, Adam Contributor address; City; State; Zip Code  Denton, TX 76201-3885	Amount of Contribution (\$)  \$2.28
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Jason Contributor address; City; State; Zip Code  McKinney, TX 75072-2928	Amount of Contribution (\$)  \$1.13
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sigal, Abby Jo Contributor address; City; State; Zip Code  New York, NY 10025-5276	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sigal, Abby Jo Contributor address; City; State; Zip Code  New York, NY 10025-5276	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/63 Rpt: 52/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kristine M. <b>6</b> Contributor address; City; State; Zip Code  Tacoma, WA 98446-4637	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kristine M. Contributor address; City; State; Zip Code  Tacoma, WA 98446-4637	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Maxine Contributor address; City; State; Zip Code  Frisco, TX 75035-5738	Amount of Contribution (\$)  \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sousa, Amy Contributor address; City; State; Zip Code  Fresno, CA 93728-2038	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sousa, Amy Contributor address; City; State; Zip Code  Fresno, CA 93728-2038	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/63 Rpt: 53/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/03/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sousa, Richard <b>6</b> Contributor address; City; State; Zip Code Norway, ME 04268-5363	<b>7</b> Amount of Contribution (\$) \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sousa, Richard Contributor address; City; State; Zip Code Norway, ME 04268-5363	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stabb, Sally Contributor address; City; State; Zip Code Carrollton, TX 75010-4003	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, John Contributor address; City; State; Zip Code Asheville, NC 28804-3802	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Sherry Contributor address; City; State; Zip Code Highland Village, TX 75077-6781	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/63 Rpt: 54/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Claudia <b>6</b> Contributor address; City; State; Zip Code  Claremont, CA 91711-4637	<b>7</b> Amount of Contribution (\$)  \$5.45
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strauss, Claudia Contributor address; City; State; Zip Code  Claremont, CA 91711-4637	Amount of Contribution (\$)  \$5.45
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC Contributor address; City; State; Zip Code  Austin, TX 78701-2321	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXPAC- STATEWIDE Texas Medical Association Political Action Contributor address; City; State; Zip Code  Austin, TX 78701-1624	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC/Texas Association of REALTOR Political Action Committee Contributor address; City; State; Zip Code  Austin, TX 78768-2246	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/63 Rpt: 55/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/19/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSCPA/Political Action Committee <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75254-7465	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Robert Contributor address; City; State; Zip Code  Columbia, MD 21044-4025	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas AFLCIO - State Cope Fund Contributor address; City; State; Zip Code  Austin, TX 78711	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Architects Committee Contributor address; City; State; Zip Code  Austin, TX 78702-2754	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Assoc of Crane Owners PAC Contributor address; City; State; Zip Code  Austin, TX 78716-3164	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/63 Rpt: 56/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/20/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Construction Assoc PAC <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701-2494	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Dental Assoc PAC Contributor address; City; State; Zip Code  Austin, TX 78704-3667	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Optometric PAC Contributor address; City; State; Zip Code  Austin, TX 78705-2032	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Strategy Group Contributor address; City; State; Zip Code  Austin, TX 78701-2488	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code  Austin, TX 78767-0788	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/63 Rpt: 57/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas United Automobile Workers CAP <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75247-6913	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodosiou, Clare Contributor address; City; State; Zip Code  Coppell, TX 75019-2417	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobin, Jonathan Contributor address; City; State; Zip Code  Needham, MA 02492-2214	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobin, Jonathan Contributor address; City; State; Zip Code  Needham, MA 02492-2214	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tormey, James Contributor address; City; State; Zip Code  Plainville, MA 02762-1122	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/63 Rpt: 58/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/26/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toyota Motor North America Inc PAC <b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20004-2818	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tx Land Title Assos PAC Contributor address; City; State; Zip Code  Dallas, TX 75204-4064	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, HI Contributor address; City; State; Zip Code  Boerne, TX 78006-7713	Amount of Contribution (\$)  \$1.82
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, HI Contributor address; City; State; Zip Code  Boerne, TX 78006-7713	Amount of Contribution (\$)  \$1.82
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughan, Ben Contributor address; City; State; Zip Code  Austin, TX 78703-1521	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody P.C.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/63 Rpt: 59/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vergamini, Karen <b>6</b> Contributor address; City; State; Zip Code Lewisville, TX 75057-3059	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilnius, Donald Contributor address; City; State; Zip Code Estero, FL 33928-9108	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilnius, Donald Contributor address; City; State; Zip Code Estero, FL 33928-9108	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelz, Patricia Contributor address; City; State; Zip Code Montgomery, TX 77356-8606	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelz, Patricia Contributor address; City; State; Zip Code Montgomery, TX 77356-8606	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/63 Rpt: 60/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vote, Marion <b>6</b> Contributor address; City; State; Zip Code  Beaverton, OR 97006-7495	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vriend, Catherine Contributor address; City; State; Zip Code  San Antonio, TX 78212-5240	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vriend, Catherine Contributor address; City; State; Zip Code  San Antonio, TX 78212-5240	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Yvonne Contributor address; City; State; Zip Code  Carrollton, TX 75007-3123	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Laura Contributor address; City; State; Zip Code  Brooklyn, NY 11220-1561	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/63 Rpt: 61/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/05/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Joe Bill <b>6</b> Contributor address; City; State; Zip Code  West Lake Hills, TX 78746-3511	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wear, Kristin Contributor address; City; State; Zip Code  Austin, TX 78759-8017	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wehlage, Julie Contributor address; City; State; Zip Code  Carrollton, TX 75006-6247	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisman, Susan Contributor address; City; State; Zip Code  Wantagh, NY 11793-1756	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy, Wood Contributor address; City; State; Zip Code  Oakland, CA 94610-4335	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/63 Rpt: 62/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Sarah <b>6</b> Contributor address; City; State; Zip Code Rockville, MD 20852-4362	<b>7</b> Amount of Contribution (\$) \$6.50
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Richard Contributor address; City; State; Zip Code Dallas, TX 75225-2066	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipperman, Barbara Contributor address; City; State; Zip Code Richmond, CA 94805-1211	Amount of Contribution (\$) \$6.50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Dorothy Contributor address; City; State; Zip Code Merion Station, PA 19066-1326	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whipple, Dorothy Contributor address; City; State; Zip Code Merion Station, PA 19066-1326	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/63 Rpt: 63/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/28/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wichary, Marcin <b>6</b> Contributor address; City; State; Zip Code San Francisco, CA 94109-8438	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Bobbie Contributor address; City; State; Zip Code Lamy, NM 87540-9675	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ben Contributor address; City; State; Zip Code Brooklyn, NY 11216-1513	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/06/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/63 Rpt: 64/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Sasha <b>6</b> Contributor address; City; State; Zip Code  Ellicott City, MD 21043-7228	<b>7</b> Amount of Contribution (\$)  \$15.63
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Rob Contributor address; City; State; Zip Code  Tiverton, RI 02878-2762	Amount of Contribution (\$)  \$1.87
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xystris, A Contributor address; City; State; Zip Code  Huntington, NY 11743-4202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xystris, A Contributor address; City; State; Zip Code  Huntington, NY 11743-4202	Amount of Contribution (\$)  \$3.12
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, David Contributor address; City; State; Zip Code  Manchester By The Sea, MA 01944-1049	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/63 Rpt: 65/89
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/09/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaner, Richard <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77058-3401	<b>7</b> Amount of Contribution (\$)  \$1.25
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles Contributor address; City; State; Zip Code  Austin, TX 78733-3243	Amount of Contribution (\$)  \$65.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeller, Charles Contributor address; City; State; Zip Code  Austin, TX 78733-3243	Amount of Contribution (\$)  \$28.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhgun, Gleb Contributor address; City; State; Zip Code  Jersey City, NJ 07302-5878	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zies, Ray Contributor address; City; State; Zip Code  Buffalo, TX 75831-6830	Amount of Contribution (\$)  \$4.55
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 63/63 Rpt: 66/89

2 FILER NAME

Beckley, Michelle J. (Ms.)

3 Filer ID (Ethics Commission Filers)  
00081736

4 Date  
11/06/2018

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Zies, Ray

7 Amount of Contribution (\$) \$4.55

6 Contributor address; City; State; Zip Code

Buffalo, TX 75831-6830

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
10/28/2018

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Zuber, Travis

Amount of Contribution (\$) \$10.00

Contributor address; City; State; Zip Code

Carrollton, TX 75007-3431

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/2 Rpt: 67/89	
<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00081736	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 11/27/2018	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC <b>7</b> Contributor address; City; State; Zip Code  Austin, TX 78768-4609	<b>8</b> Amount of contribution (\$) \$140.00	<b>9</b> In-kind contribution description Lodging in Texas  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC Contributor address; City; State; Zip Code  Austin, TX 78768-4609	Amount of contribution (\$) \$200.00	In-kind contribution description Tickets to playoff game  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A&M PAC Contributor address; City; State; Zip Code  Austin, TX 78768-4609	Amount of contribution (\$) \$400.00	In-kind contribution description Football tickets  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

## SCHEDULE A2

Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Version V1.1.28ab6150

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/21 Rpt: 69/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/08/2018	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$154.23	<b>7</b> Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2018	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue		
Amount (\$) \$1.11	Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/25/2018	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue		
Amount (\$) \$99.12	Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/21 Rpt: 70/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/18/2018	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$84.58	<b>7</b> Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2018	Payee name ActBlue	
Amount (\$) \$20.92	Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2018	Payee name ActBlue	
Amount (\$) \$3.34	Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/21 Rpt: 71/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/04/2018	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$5.51	<b>7</b> Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2018	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$22.85	Payee name ActBlue  Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/28/2018	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$32.28	Payee name ActBlue  Payee address; City; State; Zip Code PO Box 44146  Somerville, MA 12144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense commission/fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/21 Rpt: 72/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/31/2018	<b>5</b> Payee name Alvarez, Jaime	
<b>6</b> Amount (\$) \$304.50	<b>7</b> Payee address; City; State; Zip Code 2007 Meadfoot Rd  Carrollton, TX 75007-3124	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Block walking
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2018	Payee name Dominos	
Amount (\$) \$110.00	Payee address; City; State; Zip Code 1500 W Hebron Pkwy Ste 110 Carrollton, TX 75010-6531	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2018	Payee name Hustle text	
Amount (\$) \$3,891.38	Payee address; City; State; Zip Code 343 Sansome St Ste 600 San Francisco, CA 94104-5603	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense telecommunication
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/21 Rpt: 73/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/14/2018	<b>5</b> Payee name Hustle text	
<b>6</b> Amount (\$) \$61.65	<b>7</b> Payee address; City; State; Zip Code 343 Sansome St Ste 600 San Francisco, CA 94104-5603	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense telecommunication
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2018	Payee name Hustle text	
Amount (\$) \$126.90	Payee address; City; State; Zip Code 343 Sansome St Ste 600 San Francisco, CA 94104-5603	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense telecommunication
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2018	Payee name La Quinta Inns	
Amount (\$) \$535.36	Payee address; City; State; Zip Code 909 Hidden Rdg Ste 600 Irving, TX 75038-3822	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/21 Rpt: 74/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/16/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$6.17	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2018	Payee name Lyft	
Amount (\$) \$7.10	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/21 Rpt: 75/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/26/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$7.13	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/26/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$2.00	Payee name Lyft	
	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/27/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$6.35	Payee name Lyft	
	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/21 Rpt: 76/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/27/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$2.00	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2018	Payee name Lyft	
Amount (\$) \$6.35	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/21 Rpt: 77/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/29/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$6.35	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2018	Candidate/Officeholder name	Office sought
Office held		
Date 11/29/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2018	Candidate/Officeholder name	Office sought
Office held		
Date 11/29/2018	Payee name Lyft	
Amount (\$) \$6.35	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2018	Candidate/Officeholder name	Office sought
Office held		
Date 11/29/2018	Payee name Lyft	
Amount (\$) \$6.35	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/21 Rpt: 78/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/29/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$2.00	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2018	Payee name Lyft	
Amount (\$) \$6.89	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/21 Rpt: 79/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/30/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$9.28	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2018	Payee name Lyft	
Amount (\$) \$6.35	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/21 Rpt: 80/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/30/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$2.00	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2018	Payee name Lyft	
Amount (\$) \$6.76	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2018	Payee name Lyft	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/21 Rpt: 81/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/03/2018	<b>5</b> Payee name Lyft	
<b>6</b> Amount (\$) \$6.35	<b>7</b> Payee address; City; State; Zip Code 185 Berry St Ste 5000 San Francisco, CA 94107-2503	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2018	Payee name Mailchimp	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2018	Payee name Mailchimp	
Amount (\$) \$62.36	Payee address; City; State; Zip Code 675 Ponce De Leon Ave NE Ste 5000 Atlanta, GA 30308-2172	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/21 Rpt: 82/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/02/2018	<b>5</b> Payee name Ngp	
<b>6</b> Amount (\$) \$145.00	<b>7</b> Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/02/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$5.00	Payee name Ngp	
	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/11/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$960.00	Payee name Ngp	
	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/11/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$960.00	Payee name Ngp	
	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/21 Rpt: 83/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/04/2018	<b>5</b> Payee name Professional Achievers for Community Excellence	
<b>6</b> Amount (\$) \$550.00	<b>7</b> Payee address; City; State; Zip Code PO Box 112721  Carrollton, TX 75011-2721	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2018	Payee name Riley, John	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1810 E Peters Colony Rd Apt 6403 Carrollton, TX 75007-3756	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Director
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2018	Payee name Sanchez, Jana Lynne	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 319 Leisure Ln  Waxahachie, TX 75165-2152	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/21 Rpt: 84/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/21/2018	<b>5</b> Payee name Sanchez, Jana Lynne	
<b>6</b> Amount (\$) \$5,500.00	<b>7</b> Payee address; City; State; Zip Code 319 Leisure Ln  Waxahachie, TX 75165-2152	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2018	Payee name Spaniel, Vicki	
Amount (\$) \$701.25	Payee address; City; State; Zip Code 1606 Little Creek Dr  Waxahachie, TX 75165-1944	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/24/2018	Payee name Spaniel, Vicki	
Amount (\$) \$931.65	Payee address; City; State; Zip Code 1606 Little Creek Dr  Waxahachie, TX 75165-1944	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/21 Rpt: 85/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/17/2018	<b>5</b> Payee name Strobel, Jennifer	
<b>6</b> Amount (\$) \$353.98	<b>7</b> Payee address; City; State; Zip Code 609 Turley Dr Apt B Manchaca, TX 78652-6892	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing reimbursement
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2018	Payee name Strobel, Jennifer	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 609 Turley Dr Apt B Manchaca, TX 78652-6892	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2018	Payee name TE Lodgil Service	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 177 JOE ROUTT Blvd  College Station, TX 77840	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/21 Rpt: 86/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/20/2018	<b>5</b> Payee name TE Lodgil Service	
<b>6</b> Amount (\$) \$25.51	<b>7</b> Payee address; City; State; Zip Code 177 JOE ROUTT Blvd  College Station, TX 77840	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2018	Payee name TE Lodgil Service	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 177 JOE ROUTT Blvd  College Station, TX 77840	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2018	Payee name Teddy Bear Party Service	
Amount (\$) \$150.00	Payee address; City; State; Zip Code PO Box 2340  Austin, TX 78768-2340	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/21 Rpt: 87/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 10/29/2018	<b>5</b> Payee name US Postal Service	
<b>6</b> Amount (\$) \$45.50	<b>7</b> Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$1,050.00	Payee name US Postal Service	Office held
Purpose (\$) \$1,050.00	Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$700.00	Payee name US Postal Service	Office held
Purpose (\$) \$700.00	Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2018	Candidate/Officeholder name	Office sought
Amount (\$) \$700.00	Payee name US Postal Service	Office held
Purpose (\$) \$700.00	Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/21 Rpt: 88/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 11/01/2018	<b>5</b> Payee name US Postal Service	
<b>6</b> Amount (\$) \$1,050.00	<b>7</b> Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2018	Payee name US Postal Service	
Amount (\$) \$140.00	Payee address; City; State; Zip Code 2030 E Jackson Rd  Carrollton, TX 75006-1738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2018	Payee name Wow Dems via ActBlue	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Democratic club
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/21 Rpt: 89/89	<b>2</b> FILER NAME Beckley, Michelle J. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00081736
<b>4</b> Date 12/28/2018	<b>5</b> Payee name Wow Dems via ActBlue	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  West Somerville, MA 02144-0031	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Democratic club
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held